



## REQUEST FOR ASSISTANCE (RFA) FORM INTAKE INTERVIEW LOG

<u>Date:</u> 4/4/2013	<u>Interviewer:</u> Laura Eckert	<b>RFA #13 – 20</b>
<u>Person(s) Requesting Assistance:</u> [REDACTED]		
<u>Contact Numbers (telephone, e-mail, etc.):</u> [REDACTED]		
<u>Status of Person(s) Interviewed (title, position, student status, etc.):</u> WWU student [REDACTED]		
<u>Requested Assistance Pertaining To (name, position, policy, project, etc.)</u> Supervisor's comments		

To the best of your knowledge, please fill out the following:

Interviewee Status:    Male ☐ Female ☒    Administrator ☐ Faculty ☐ Staff ☐ Student ☒  
Concern Regarding:    Male ☐ Female ☒    Administrator ☐ Faculty ☐ Staff ☒ Student ☐

**Category:** (Please check at least one)

- |  |  |   |                                     |  |
|--|--|---|-------------------------------------|--|
| <input type="checkbox"/> Age                           | <input type="checkbox"/> Color             | <input type="checkbox"/> Creed              | <input type="checkbox"/> Disability | <input type="checkbox"/> Veteran Status      |
| <input type="checkbox"/> Marital Status                | <input type="checkbox"/> National Origin   | <input type="checkbox"/> Race               | <input type="checkbox"/> Religion   | <input type="checkbox"/> Retaliation         |
| <input type="checkbox"/> Sex/Gender                    | <input type="checkbox"/> Sexual Harassment | <input type="checkbox"/> Sexual Orientation | <input type="checkbox"/> Employment | <input type="checkbox"/> Genetic Information |
| <input type="checkbox"/> Gender Identity or Expression |  |   |                                     |  |

Time Line		
Date	Item	Comments
4/4/2013	LE t/c w [REDACTED]	See notes in file. Scheduled appointment, but [REDACTED] did not show.

**Resolution:**

- |  |  |
|--|--|
| <input type="checkbox"/> Resolved to Individual's Satisfaction [R] | <input type="checkbox"/> Unresolved [U]                              |
| <input type="checkbox"/> Transitioned to Complaint [F]             | <input type="checkbox"/> Referred to another University Office [REF] |

***Provide a summary of the discussion, including recommendations provided.  
Subsequent discussions, requests for assistance and/or follow-ups on this issue  
should be included chronologically below.***